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UNITED STATES OF AMERICA COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION					0FGS FILE NO. 1909 - 181	
As a below named inventor. I hereby declare that: my residence, post office address and citizenship are as stated below next to my name:						
and the miner a patent is sought on the invention shilled:						
DIGITAL RADIO APPARATUS						
the consideration of the state						
the specification of which is attached hereto, unless the following box is checked: was filed on February 7, 2005 as United States petent Application Number of Deep Land Control of the specific						
number PCT/JP2005/001792 and was amended on (if any).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by amendment referred to above.						
I scknowledge the duty to disclose all information known to be material to account it.						
Regulations, §1.56. Thereby claim priority begafts under Title 27, Code of Federal						
I hereby claim priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or United States provisional application(s) listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
having a filing date before that of the application on which priority is claimed:						
Prior Foreign or Provisional Application(s)						
COUNTRY		ICATION NUMBER	DATE OF	FII ING	T	
			(day, month		PRIORITY CLAIMED UNDER 35 U.S.C. 119	
Japan	037	539/2004	13, 2,	, 2004	YES X NO	
·					YES NO	
					YES NO	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in international filing date of this application.						
UNITED STATES APPLICATION NUMBER	R DATE OF FILING (day, month, year)			<u> </u>	STATUS (patented, pending, abandoned)	
ATTECATION NUMBER				(patented		
						
				 		
						
I hereby appoint OSTROLENK, FABER, GERB & SOFFEN, and the members of the firm, Marvin C. Soffen - Reg. No. 17,542; Samuel 24,735; Stanley H. Lieberstein - Reg. No. 22,400; Steven I. Weisburd - Reg. No. 27,409; Max Moskowitz - Reg. No. 30,576; Stephen A. Soffen - Reg. No. 31,063; James A. Finder - Reg. No. 30,173; William O. Gray, III - Reg. No. 30,944 and Louis C. Dujmich - Reg. No. 17,642; Samuel 24,735; Stanley H. Lieberstein - Reg. No. 30,576; Stephen A. Soffen - Reg. No. 31,063; James A. Finder - Reg. No. 30,173; William O. Gray, III - Reg. No. 30,944 and Louis C. Dujmich - Reg. No. 17,642; Samuel 24,735; Stanley H. Lieberstein - Reg. No. 30,576; Stephen A. 19,652; As attorneys with full power of substitution and revocation to prosecute this application, to transact all business in the Patent & SEND CORRESPONDENCE.						
END CORRESPONDENCE TO: OSTROLENK, FABER. GERB & SOFFEN DIRECT TELEPHONE CALLS TO: 1180 AVENUE OF THE AMERICAS (212) 382-0700 NEW YORK, NEW YORK 10036-8403						
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are pelieved to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements are peopardize the validity of the application or any patent issued thereon.						
TULL NAME OF SOLB OR FIRST INVENT	OR	INVENTOR'S SIGNATURE	7 11	1 (==	DATE	
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ULL NAME OF SECOND JOINT INVENTO	OR (IF ANY)	INVENTOR'S SIGNATURE	ic, minaco-,	tu, Tokyc		
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ULL NAME OF THIRD JOINT INVENTOR	(IF ANY)	INVENTOR'S SIGNATURE				
	,	CHICK S SIGNATURE			DATE	
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